

NEW YORK STATE OFFICE FOR THE AGING

2 Empire State Plaza, Albany, NY 12223-1251

Andrew M. Cuomo, Governor

An Equal Opportunity Employer

Greg Olsen, Acting Director

PROGRAM INSTRUCTION	Number 16-PI-17
	Supersedes 16-PI-02
	Expiration Date NA

DATE: August 11, 2016

TO: Area Agency on Aging (AAA) Directors

**SUBJECT: Medicare Improvements for Patients and Providers Act (MIPPA)
Application for AAA/State Health Insurance Assistance Program
(SHIP)/Aging and Disability Resource Center (ADRC) Funding**

.....

ACTION REQUESTED: AAAs must complete the attached budget for MIPPA funding and submit it to the New York State Office for the Aging. This funding constitutes the third program year of a three year MIPPA grant which began September 30, 2014 and ends September 29, 2017. Annual budget updates are required from AAAs and may reflect a change in allocation as a result of annual federal funding levels awarded to NYSOFA. Only AAAs that administered a NY Connects Program prior to September 30, 2014 are eligible to apply for the ADRC portion of the MIPPA funding for this three year grant period. Please note, the narrative justification must be completed for each position listed in Section 1, Personnel. If you charge a staff position to both SHIP/AAA and ADRC funding, you must provide a detailed explanation that specifies the particular duties that are relevant and appropriate to that funding stream. This applies to the budget pages for all entities (SHIP/AAA, ADRC, and contractors, if applicable). See BUDGET DIRECTION on pages 3 and 4 for additional information.

RESPONSE DUE DATE: Completed budgets, signed Signature Page in PDF, Standard Assurances, and Work Plan must be sent electronically to Lori Sanders at Lori.Sanders@aging.ny.gov by **Friday, September 16, 2016**.

If unable to electronically submit the signed Signature Page in PDF, mail one (1) signed original cover page via US Postal Service to:

Lori Sanders
Bureau of Programs, Services, and Systems Integration
NY State Office for the Aging
2 Empire State Plaza, 4th floor
Albany, NY 12223

PURPOSE: The purpose of this funding is to support local AAAs/HIICAPs/NY Connects in their efforts to educate and assist eligible Medicare beneficiaries with enrollment into the Medicare Low-Income Subsidy (LIS) Program and the Medicare Savings Program (MSP); provide counseling and assistance on accessing the Medicare Prescription Drug Coverage Part D, especially for those beneficiaries who are low-income, underserved, and/or residing in rural areas; and to promote the availability of Medicare preventive and wellness services.

BACKGROUND: The Medicare Improvements for Patients and Providers Act (MIPPA) was enacted in 2008 and provided initial funding to states, territories, and the District of Columbia to support targeted LIS/MSP enrollment for Medicare beneficiaries who were eligible for the benefits but not yet enrolled. The MIPPA funding was also used to provide education and outreach directed at raising beneficiary awareness and understanding of Part D and available preventive and wellness benefits. After 2008, continued funding for states was authorized by the Affordable Care Act in March 2010 (Section 3306), the American Taxpayer Relief Act of 2012, and most recently in the Protecting Access to Medicare Act of 2014. The MIPPA Program is administered by the Administration for Community Living.

Under the 2014 – 2017 MIPPA grant, the AAAs, the local HIICAPs (New York State's designated SHIP Programs), and local NY Connects Programs (New York's federally recognized ADRCs), will be expected to continue their coordinated efforts to inform and assist Medicare beneficiaries with the aforementioned available Federal and State benefits and to ensure that their county/designated catchment area achieves all goals, objectives, deliverables, measurable outcomes, and targets set forth in the 2014-17 MIPPA Work Plan and Annual Minimum Targets Table.

USE OF MIPPA FUNDS: MIPPA funds must be used for LIS and MSP outreach and assistance efforts directed toward Medicare beneficiaries with limited incomes, for outreach and assistance relating to Medicare Part D for beneficiaries in rural areas, and for activities related to the promotion and distribution of information on Medicare preventive and wellness services. Specifically, MIPPA funding under this application must be used to fund the following:

- MIPPA activities to reach those potentially eligible for LIS or MSP programs must be above and beyond those regular activities that are planned using HIICAP's base grant funding provided for the program this year. This would include special efforts to reach culturally diverse populations and individuals with limited English proficiency.
- AAAs, HIICAPs, and NY Connects programs should make use of zip code data provided by CMS and other mapping tools provided by NCOA to conduct targeted outreach efforts related to reaching beneficiaries most likely eligible, but not enrolled, into the LIS, MSP or New York State's Prescription Assistance Program (i.e., EPIC).
- AAAs, HIICAPs, and NY Connects should expand partnerships with community-based agencies to reach Medicare beneficiaries who are not enrolled in the LIS or MSP programs. Moreover, they should consider specific activities to conduct outreach such as direct mail, public and media events, paid advertising and other methods to reach potential enrollees.
- AAAs should consider screening individuals who are recipients of the Home Energy Assistance Program, Expanded In Home Services for the Elderly (EISEP) Program, Home Delivered Meals, Chronic Disease Self-Management Education Programs, and Social Adult Day Services for LIS/MSP.
- Local programs funded as "rural" must ensure that MIPPA funds are used to enhance efforts to reach and assist people eligible for Part D in these identified rural areas of the state.
- AAAs, HIICAPs, and NY Connects programs must agree to designate a portion of the grant funding to conduct outreach activities aimed at preventing disease or chronic conditions and promoting wellness. At minimum, counties must agree to disseminate the "Senior Health Check Up" flyer to Medicare beneficiaries, which will be updated by NYSOFA.
- Local Long Term Care Councils must be engaged to help AAAs, NY Connects, and HIICAP Programs identify outreach opportunities and provide additional community resources that can provide LIS/MSP application assistance and educate individuals about Medicare preventive and wellness services.

BUDGET DIRECTION: The amount of MIPPA funds allocated to each county is detailed in the Tentative Allocation Schedule. NYSOFA has combined the allocations for AAAs and HIICAPs, but the funding for NY Connects is separate and distinct. Note: Only AAAs that administered a NY Connects Program prior to September 30, 2014 are eligible to apply for the ADRC portion of the MIPPA funding for this three year grant period. Specific budget direction on personnel is as follows:

- The Narrative Justification on the Supporting Budget Schedule must be completed for each staff position listed.
- Staff working on both the SHIP/AAA and ADRC funded activities (i.e., same staff person (s) are in both the SHIP/AAA and ADRC budget components): Within the Narrative Justification on the Supporting Budget Schedule, you must describe the specific duties/role/contributions of that individual in relation to **each** funding stream. These duties must be above and beyond those already supported with other, existing funding (e.g., HIICAP, NY Connects). For example, if you are charging a NY Connects Coordinator to the SHIP/AAA budget component, you must describe how that individual is contributing to allowable SHIP/AAA MIPPA activities (e.g., providing education and training on Medicare preventive and wellness services). Similarly, if you are charging a HIICAP Coordinator to the ADRC budget component, you must describe how that individual is supporting allowable NY Connects/ADRC MIPPA activities (e.g., providing education/training to NY Connects staff on LIS/MSP).
- Support/contributions from staff other than program coordinators: If you are charging administrative, technical, or other appropriate staff to support MIPPA activities (SHIP/AAA or ADRC), you must describe the specific role relative to the goals/objectives/key tasks of this grant. For example, if you are charging a portion of salary for administrative support, you must describe the duties in relation to MIPPA activities (e.g., provide MIPPA data entry into SHIP Talk, assemble mass mailings for outreach targets, schedule MIPPA meetings with HIICAP/ADRC staff, etc.).
- Contractors: If either SHIP/AAA or NY Connects is utilizing a contractor(s) to perform MIPPA grant deliverables, then a Contractor budget will need to be completed (per funding stream) as part of the AAA application. For example, if the AAA is allocating funds to a contractor from the SHIP/AAA and the NY Connects funds, then two Contractor budgets need to be completed and must describe the contractor's role relative to each unique funding stream.
- In-Kind Support: Please include all staff who are contributing to MIPPA activities regardless of whether or not they are charging salary to this funding (in either/both SHIP/AAA and ADRC budget components). Complete all sections of the personnel form and list "0" for the "% of time" and "amount chargeable to the program".

PROHIBITED USE OF MIPPA FUNDS:

Funding for the MIPPA Grants for FY 2014-2017 **may not** be used for any of the following:

- To match any other federal funds.
- To provide services, equipment, or supports that are the legal responsibility of another party under federal or state law (e.g., vocational rehabilitation or education services) or under any civil rights laws. Such legal responsibilities include, but are not limited to, modifications of a workplace or other reasonable accommodations that are a specific obligation of the employer or other party.
- To provide infrastructure for which federal matching funds are claimed.
- To supplant existing state, local, or private funding of infrastructure or services such as staff salaries, etc.
- To be used for data processing software or hardware in excess of the software and personal computers required for staff devoted to the grant.
- To purchase promotional items and memorabilia, including models, gifts, and souvenirs.
- To cover direct service costs other than those associated with the following activities:
 - outreach to Medicare beneficiaries eligible to apply for the Medicare Part D LIS/MSP,,
 - provision of Part D counseling to benefit Medicare beneficiaries in rural areas and,
 - promotion of available Medicare preventive and wellness services.

PROGRAMS AFFECTED:

- | | | |
|--------------------------------------|--|--|
| <input type="checkbox"/> Title III-B | <input type="checkbox"/> Title III-C-1 | <input type="checkbox"/> Title III-C-2 |
| <input type="checkbox"/> Title III-D | <input type="checkbox"/> Title III-E | <input type="checkbox"/> CSE |
| <input type="checkbox"/> EISEP | <input type="checkbox"/> NSIP | <input type="checkbox"/> Title V |
| | <input checked="" type="checkbox"/> HIICAP | <input type="checkbox"/> LTCOP |
| | <input type="checkbox"/> WIN | <input type="checkbox"/> Energy |

x Other: NY Connects

CONTACT PERSON:

HIICAP - Brenda LaMere

TELEPHONE:

518-474-6085

APPLICATION FOR MIPPA FUNDING

Program Period: September 30, 2016 to September 29, 2017

**Funded under grants from the Centers for Medicare & Medicaid Services and Administration for
Community Living**

Instructions: Please complete the following informational form and submit one (1) original signed copy
to:

Lori Sanders
New York State Office for the Aging
Two Empire State Plaza, 4th Floor, Albany, NY 12223-1251

Area Agency: _____

Director: _____

Address: _____

HIICAP Coordinator: _____

HIICAP Coordinator Phone Number: _____

Email Address: _____

Mailing address (if different from the AAA): _____

NY Connects Coordinator: _____

NY Connects Coordinator Phone Number: _____

Email Address: _____

Mailing address (if different from the AAA): _____

Amount Requested: _____

TERMS AND CONDITIONS: The undersigned agrees with respect to any funds received under this grant to comply with all applicable federal, state and local laws, Program Instructions, regulations and standards, and that the project will be administered in accordance with the programmatic and fiscal data descriptions provided in the approved application.

The person authorized to enter into Agreement with the New York State Office for the Aging should sign below.

Name: _____

Title: _____

Signature: _____

Date: _____

MIPPA - STANDARD ASSURANCES
Program Year: September 30, 2016 to September 29, 2017

The Area Agency on Aging (AAA), as grantee, understands that this Grant Agreement represents the completed grant application of the AAA, as approved by the New York State Office for the Aging (NYSOFA), and the AAA agrees to comply with New York State and Federal laws and regulations that are applicable to this Grant Agreement and to comply with the following requirements that govern the AAA's use of grant funds for the activities funded under this grant.

1. The AAA agrees that the Program Instruction and Budget, included in this Grant Agreement as approved by NYSOFA, are part of this Grant Agreement and shall not be modified without the written consent of NYSOFA.

The AAA shall furnish NYSOFA required supportive documentation for any such changes by utilizing the forms and procedures included in 05-PI-09 Modification Procedures for Grant Applications, dated June 15, 2005.

2. The AAA agrees to fulfill the monthly reporting requirements as specified by NYSOFA's Program Instruction 16-PI-06 for all MIPPA client contacts, assistance with LIS/MSP applications, and targeted outreach events via the National SHIP (State Health Insurance Assistance Program) reporting system at <https://shipnpr.acl.gov>.
3. The AAA agrees that the Grant Agreement may not be assigned by the AAA or its right, title or interest therein assigned, transferred, conveyed, or disposed of without the prior consent, in writing, of NYSOFA.
4. The AAA agrees to submit Form AC3253-S CLAIM FOR PAYMENT for reimbursement of expenses incurred in the conduct of this Grant Agreement on a monthly basis and no later than at the end of each quarter.
5. The AAA will submit to NYSOFA the final voucher for expenses incurred in the conduct of this Grant Agreement as soon as possible and no later than sixty (60) days after the ending date of the grant period.
6. The AAA agrees that state vouchers submitted for reimbursement of expenses incurred in the conduct of this Grant Agreement will not include any expenses which have been, or will be, reimbursed from other sources (e.g., other state or federal funds).
7. The AAA agrees to use the funds obtained under this Grant Agreement only for items of expense that are applicable to the activities set out in its Program Instruction and Budget. Allowable items of expense shall be reasonable, allocable and necessary to carry out the activities described in the Grant Agreement.
8. The AAA agrees that funds may not be used to:
 - Cover direct service costs other than those associated with the following:
 - outreach to Medicare beneficiaries eligible to apply for the Medicare Part D LIS/MSP,

- provision of Part D counseling to benefit Medicare beneficiaries in rural areas and
 - promotion of available Medicare preventive and wellness services.
- To match any other federal funds.
- To provide services, equipment, or supports that are the legal responsibility of another party under federal or state law (e.g., vocational rehabilitation or education services) or under any civil rights laws. Such legal responsibilities include, but are not limited to, modifications of a workplace or other reasonable accommodations that are a specific obligation of the employer or other party.
- To provide infrastructure for which federal matching funds are claimed.
- To supplant existing state, local, or private funding of infrastructure or services such as staff salaries, etc.
- To be used for data processing software or hardware in excess of the software and personal computers required for staff devoted to the grant.
- To purchase promotional items and memorabilia, including models, gifts, and souvenirs.
9. If the Grantee fails to comply with the terms and conditions of this Grant Agreement and/or with any laws, rules, regulations, policies or procedures affecting this Grant Agreement NYSOFA may terminate the Grant Agreement immediately, upon written notice of termination to the Grantee.

MIPPA 2014-17 Work Plan

16-PI-17

Goal 1: Raise Medicare beneficiary awareness and enroll more Medicare beneficiaries in the LIS and/or MSP benefit, particularly in the underserved zip codes identified by CMS and in the rural areas of New York State.		
Objective	Key Tasks	Documentation/Measurable Outcomes
1. To assist individuals with the application and enrollment processes for MSP and LIS.	a. The AAA, ADRC and HIICAP will coordinate local processes and protocols to ensure that the minimum number of LIS/MSP applications is achieved as per the Annual Minimum Targets Table.	Quarterly client contact data is collected and submitted.
	b. As applicable, the AAA, ADRC and HIICAP will screen all Home Energy Assistance Program (HEAP), Expanded In Home Services for the Elderly Program (EISEP), Social Adult Day Services (SADS), and Home Delivered Meals clients for MSPs and LIS.	
	c. The AAA, ADRC and HIICAP will target outreach and assistance activity through use and application of the CMS Mapping Tool to identify areas where significant populations of LIS eligible beneficiaries reside.	Quarterly qualitative narrative is compiled from relevant local partners participating in MIPPA, summarized and submitted.
2. To raise Medicare beneficiary awareness of the LIS and MSP.	a. The AAA will administer outreach events on LIS and MSP and ensure minimum number of events is reached as per Annual Minimum Targets Table.	Quarterly outreach and enrollment event data is collected and submitted.
	b. The AAA will administer enrollment events on LIS and MSP and ensure minimum number of events is reached as per Annual Minimum Targets Table.	
	c. The AAA will develop innovative outreach strategies (e.g. public service announcements, home visits, working with the local Long Term Care Councils, etc.) to target potential LIS/MSP eligible residing in rural/underserved areas as well as culturally diverse individuals and those with limited English proficiency.	Quarterly qualitative narrative is compiled from relevant local partners participating in MIPPA (e.g., NY Connects), summarized and submitted.

MIPPA 2014-17 Work Plan
16-PI-17

Objective	Key Tasks	Documentation/Measurable Outcomes
2. To raise Medicare beneficiary awareness of the LIS and MSP (continued)	d. To better target Medicare beneficiaries who are eligible but not enrolled in LIS/MSP, identify and expand/enhance existing partnerships with nonprofit community-based agencies that provide program/services or outreach and engagement to low and moderate income multicultural communities.	Quarterly qualitative narrative is compiled from relevant local partners participating in MIPPA (e.g., NY Connects), summarized and submitted.
	e. The AAA, ADRC and HIICAP will participate in monthly HIICAP teleconferences to receive relevant updates and share lessons learned/creative practices regarding LIS/MSP.	Participation verified by NYSOFA.

MIPPA 2014-17 Work Plan

16-PI-17

Goal 2: Educate Medicare beneficiaries across New York State on Medicare preventive and wellness benefits and the importance of these services.		
Objective	Key Tasks	Documentation/Measurable Outcomes
1. Increase awareness of preventive and wellness benefits to Medicare beneficiaries.	a. The AAA, ADRC and HIICAP will utilize and disseminate the updated Senior Health Check Up Flyer that is distributed by NYSOFA via the HIICAP Update on a quarterly basis.	Quarterly outreach data is collected and submitted.
	b. The AAA, ADRC and HIICAP will administer and document outreach events on Medicare preventive and wellness benefits to Medicare beneficiaries and ensure that minimum number of events is reached as per the Annual Minimum Targets Table.	
	c. The AAA, ADRC and HIICAP will participate in monthly HIICAP teleconferences to receive relevant updates and share lessons learned/creative practices regarding Medicare preventive and wellness benefits/services.	Participation verified by NYSOFA.

MIPPA 2014-17 Work Plan
16-PI-17

Goal 3: Enroll Medicare beneficiaries across New York State in the Part D benefit, focusing on the rural areas of the State.		
Objective	Key Tasks	Documentation/Measurable Outcomes
1. Conduct outreach and enrollment events and develop local strategies to raise awareness of Part D.	a. The AAA, NY Connects and HIICAP will administer outreach events specifically on Part D and ensure that minimum number of events is reached as per Annual Minimum Targets Table.	Quarterly outreach data is collected and submitted:
	b. The AAA, NY Connects and HIICAP will participate in monthly HIICAP teleconferences to receive relevant updates and share lessons learned/creative practices regarding Medicare Part D.	Participation verified by NYSOFA

Annual Minimum Targets
MIPPA 2016-2017

County	LIS/MSP Applications		Outreach events				
			Enrollment Events	Education Part D	LIS/MSP	Prevention and Wellness	
	12,500		150	1000	1500	1500	
	NY Connects	AAA/SHIP	AAA	AAA	AAA	NY Connects	AAA/SHIP
Albany	60	175	2	12	17	8	15
Allegany	43	100	2	12	17	6	15
Broome	57	125	2	12	17	8	15
Cattaraugus	47	100	2	12	17	6	15
Cayuga	43	100	2	12	17	6	15
Chautauqua	55	100	2	12	17	8	15
Chemung	45	100	2	12	17	6	15
Chenango	43	100	2	12	17	6	15
Clinton	43	100	2	12	17	6	15
Columbia	43	100	2	12	17	6	15
Cortland	43	100	2	12	17	6	15
Delaware	43	100	2	12	17	6	15
Dutchess	58	125	3	12	17	8	15
Erie	168	300	5	35	51	20	25
Essex	43	100	2	12	17	6	15
Franklin	50	100	2	12	17	7	15
Fulton	43	100	2	12	17	6	15
Genesee	43	100	2	12	17	6	15
Greene	43	100	2	12	17	6	15
Herkimer	43	100	2	12	17	6	15
Jefferson	45	100	2	12	17	6	15
Lewis	43	100	2	12	17	6	15
Livingston	43	100	2	12	17	6	15
Madison	43	100	2	12	17	6	15
Monroe	156	200	2	25	33	15	20
Montgomery	43	100	2	12	17	6	15
Nassau	169	255	3	32	34	15	25
New York City	0	2500	30	243	435	0	200
Niagara	58	125	2	12	17	8	15
Oneida	60	175	2	12	17	8	15
Onondaga	148	150	2	14	19	10	15
Ontario	43	100	2	12	17	6	15
Orange	61	125	2	12	17	8	15
Orleans	43	100	2	12	17	6	15

County	LIS/MSP Applications		Outreach events				
			Enrollment Events	Education Part D	LIS/MSP	Prevention and Wellness	
	12,500		150	1000	1500	1500	
	NY Connects	AAA/SHIP	AAA	AAA	AAA	NY Connects	AAA/SHIP
Oswego	0	100	2	12	17	0	15
Otsego	43	100	2	12	17	6	15
Putnam	43	100	2	12	17	6	15
Rensselaer	0	100	2	12	17	0	15
Rockland	0	125	2	12	17	0	15
Saratoga	56	100	2	12	17	8	15
Schenectady	55	100	2	12	17	8	15
Schoharie	43	100	2	12	17	6	15
Schuyler	43	100	2	12	17	5	15
Seneca	0	100	2	12	17	0	15
Seneca Nation	0	50	1	1	2	0	5
St. Lawrence	55	100	2	12	17	8	15
St.Regis Mohawk	26	50	1	1	2	3	5
Steuben	45	100	2	12	17	6	15
Suffolk	173	250	2	25	38	10	20
Sullivan	43	100	2	12	17	6	15
Tioga	43	100	2	12	17	6	15
Tompkins	43	100	2	12	17	6	15
Ulster	57	100	2	12	17	8	15
Warren/Hamilton	83	175	2	12	17	13	30
Washington	43	100	2	12	17	6	15
Wayne	43	100	2	12	17	6	15
Westchester	161	200	3	24	36	18	25
Wyoming	43	100	2	12	17	6	15
Yates	43	100	2	12	17	5	15
	15695	9305				1895	1105
TOTAL:	25000		300	2000	3000	3000	
GOAL:	12500		150	1000	1500	1500	

Area Agency: _____

Program Period: 9/30/16 - 9/29/17

16-PI-17

**MEDICARE IMPROVEMENTS FOR PATIENTS AND PROVIDERS PROGRAM (MIPPA)
Combined Budget Summary**

BUDGET CATEGORY	MIPPA (SHIP and AAA) BUDGET	MIPPA (ADRC) BUDGET	TOTAL
1. Personnel	\$ -	\$ -	\$ -
2. Fringe Benefits	\$ -	\$ -	\$ -
3. Equipment	\$ -	\$ -	\$ -
4. Travel	\$ -	\$ -	\$ -
5. Maintenance & Operations	\$ -	\$ -	\$ -
6. Other Expenses	\$ -	\$ -	\$ -
7. Contracts	\$ -	\$ -	\$ -
8. Total Budget (Lines 1 thru 7)	\$ -	\$ -	\$ -
9. Program Income			\$ -
10. Net Total Budget (Line 8 minus 9)	\$ -	\$ -	\$ -
11. Federal Funds Requested	\$ -	\$ -	\$ -
12. Local Funds			\$ -

MEDICARE IMPROVEMENTS FOR PATIENTS AND PROVIDERS PROGRAM (MIPPA)
SHIP and AAA Components
Supporting Budget Schedule

1. Personnel - AAA salaries are listed here.								
		Complete for Each Position (N)ame, (T)itle, (L)ocation	Annual Salary or Hourly Rate*	Hours worked on program per week	Total Hours worked per week	Chargeable to Program		Narrative Justification - For each position, provide a brief summary of duties related to MIPPA: *If charging the NYConnects Coordinator to SHIP/AAA funding, please indicate what MIPPA responsibility the NYConnects Coordinator will perform for (or on behalf of) SHIP/AAA staff. *Include specificity and relevance to MIPPA activities for all staff charged to this grant (i.e., administrative support, IT, managerial, etc.). *Include all in-kind staff that are contributing to MIPPA but are not charging salary.
						% of Time	Amount	
1	N							
	T							
	L							
2	N							
	T							
	L							
3	N							
	T							
	L							
4	N							
	T							
	L							
5	N							
	T							
	L							
6	N							
	T							
	L							
Total Program Personnel:							\$0.00	
*Note: If employee is paid a salary, then list the annual salary. If employee is not on salary, then list the hourly rate. When reporting the rate of pay on vouchering forms, the format (i.e., salary or hourly rate) must match this budget (although the actual salary or the hourly rate paid may be different than budgeted).								
2. Fringe Benefits- Fringe Benefits should be directly proportional to that portion of personnel costs that are program related. Provide a clear justification if the expenses are not proportionally allocated.								
Fringe Benefit Rate %:			0.00%	Total Fringe:			\$0.00	

**MEDICARE IMPROVEMENTS FOR PATIENTS AND PROVIDERS PROGRAM (MIPPA)
SHIP and AAA Components
Supporting Budget Schedule**

<p>3. Equipment: Equipment items having a unit cost of \$1000 or more must be described in detail. Other equipment items with a unit cost of less than \$1000 can be described in narrative form at the bottom of this section.</p>				
Item and Description (Unit cost of \$1000 or more)	Quantity	Unit Purchase Price	Annual Unit Rental price	Amount Chargeable to Program
Briefly describe equipment items with a unit cost of less than \$1000.				
Total				\$ -
4. Travel				
Travel costs - briefly describe:				
Total				\$ -
5. Maintenance & Operations:				
Rental costs: briefly describe: _____				
Other Maintenance & Operations Costs: List Below (e.g., communications, printing, supplies, etc.) _____				
Total				\$ -

**MEDICARE IMPROVEMENTS FOR PATIENTS AND PROVIDERS PROGRAM (MIPPA)
SHIP and AAA Components
Supporting Budget Schedule**

6. Other Expenses			
Description	Total Cost	Amount Chargeable to Program	
Total:		\$	-
7. Contracts: List each contract and amount. A copy of each contract must be submitted to the State Office for the Aging before reimbursement will be made. If contract costs compose more than 25% of the total budget attach a Contractor Budget for each contractor.			
Contractor	Service(s) to be Provided	NYSOFA Use Contract Rec'd.	Amount Chargeable to Program
Total Number of Contracts: _____		Total	\$ -
12. Local Funds			
Source	Amount		
		Total	\$ -

**MEDICARE IMPROVEMENTS FOR PATIENTS AND PROVIDERS PROGRAM (MIPPA)
ADRC Component
Supporting Budget Schedule**

1. Personnel - AAA salaries are listed here.							
	Complete for Each Position (N)ame, (T)itle, (L)ocation	Annual Salary or Hourly Rate*	Hours worked on program per week	Total Hours worked per week	Chargeable to Program		Narrative Justification - For each position, provide a brief summary of duties related to MIPPA: *If charging the SHIP/AAA staff to NY Connects, please indicate what MIPPA responsibility the SHIP/AAA staff will perform for (or on behalf of) NY Connects staff. *Include specificity and relevance to MIPPA activities for all staff charged to this grant (i.e., administrative support, IT, managerial, etc.). *Include all in-kind staff that are contributing to MIPPA but are not charging salary.
					% of Time	Amount	
1	N						
	T						
	L						
2	N						
	T						
	L						
3	N						
	T						
	L						
4	N						
	T						
	L						
5	N						
	T						
	L						
6	N						
	T						
	L						
Total Program Personnel:							\$0.00
*Note: If employee is paid a salary, then list the annual salary. If employee is not on salary, then list the hourly rate. When reporting the rate of pay on vouchering forms, the format (i.e., salary or hourly rate) must match this budget (although the actual salary or the hourly rate paid may be different than budgeted).							
2. Fringe Benefits- Fringe Benefits should be directly proportional to that portion of personnel costs that are program related. Provide a clear justification if the expenses are not proportionally allocated.							
Fringe Benefit Rate %:		0.00%	Total Fringe:		\$0.00		

**MEDICARE IMPROVEMENTS FOR PATIENTS AND PROVIDERS PROGRAM (MIPPA)
ADRC Component
Supporting Budget Schedule**

3. Equipment: Equipment items having a unit cost of \$1000 or more must be described in detail. Other equipment items with a unit cost of less than \$1000 can be described in narrative form at the bottom of this section.				
Item and Description (Unit cost of \$1000 or more)	Quantity	Unit Purchase Price	Annual Unit Rental price	Amount Chargeable to Program
Briefly describe equipment items with a unit cost of less than \$1000.				
Total				\$ -
4. Travel				
Travel costs - briefly describe:				
Total				\$ -
5. Maintenance & Operations:				
Rental costs: briefly describe: _____				
Other Maintenance & Operations Costs: List Below (e.g., communications, printing, supplies, etc.) _____				
Total				\$ -

**MEDICARE IMPROVEMENTS FOR PATIENTS AND PROVIDERS PROGRAM (MIPPA)
ADRC Component
Supporting Budget Schedule**

6. Other Expenses			
Description	Total Cost	Amount Chargeable to Program	
Total:		\$	-
7. Contracts: List each contract and amount. A copy of each contract must be submitted to the State Office for the Aging before reimbursement will be made. If contract costs compose more than 25% of the total budget attach a Contractor Budget for each contractor.			
Contractor	Service(s) to be Provided	NYSOFA Use Contract Rec'd.	Amount Chargeable to Program
Total Number of Contracts: _____		Total	\$ -
12. Local Funds			
Source	Amount		
Total		\$	-

Contractor: _____

Program Period: 9/30/15 - 9/29/16

**MEDICARE IMPROVEMENTS FOR PATIENTS AND PROVIDERS PROGRAM (MIPPA)
Contractor Budget Summary (SHIP and AAA)**

BUDGET CATEGORY	MIPPA (SHIP and AAA) BUDGET
1. Personnel	\$ -
2. Fringe Benefits	\$ -
3. Equipment	\$ -
4. Travel	\$ -
5. Maintenance & Operations	\$ -
6. Other Expenses	\$ -
7. Contracts/Consultants	\$ -
8. Total Budget (Lines 1 thru 7)	\$ -

**MEDICARE IMPROVEMENTS FOR PATIENTS AND PROVIDERS PROGRAM (MIPPA)
Contractor SHIP and AAA Component
Contractor Supporting Budget Schedule**

1. Personnel - Salaries are listed here.							
	Complete for Each Position (N)ame, (T)itle, (L)ocation	Annual Salary or Hourly Rate*	Hours worked on program per week	Total Hours worked per week	Chargeable to Program		Narrative Justification - For each position, provide a brief summary of duties related to MIPPA: *If charging a staff position to both SHIP/AAA and ADRC funding, provide explanation and clarity as to the individual MIPPA duties specific to SHIP/AAA and duties specific to ADRC. *Include specificity and relevance to MIPPA activities for all staff charged to this grant (i.e., administrative support, IT, managerial, etc.). *Include all in-kind staff that are contributing to MIPPA but are not charging salary.
					% of Time	Amount	
1	N						
	T						
	L						
2	N						
	T						
	L						
3	N						
	T						
	L						
4	N						
	T						
	L						
5	N						
	T						
	L						
6	N						
	T						
	L						
Total Program Personnel:						\$0.00	
*Note: If employee is paid a salary, then list the annual salary. If employee is not on salary, then list the hourly rate. When reporting the rate of pay on vouchering forms, the format (i.e., salary or hourly rate) must match this budget (although the actual salary or the hourly rate paid may be different than budgeted).							
2. Fringe Benefits- Fringe Benefits should be directly proportional to that portion of personnel costs that are program related. Provide a clear justification if the expenses are not proportionally allocated.							
Fringe Benefit Rate %:		0.00%	Total Fringe:			\$0.00	

**MEDICARE IMPROVEMENTS FOR PATIENTS AND PROVIDERS PROGRAM (MIPPA)
Contractor SHIP and AAA Component
Contractor Supporting Budget Schedule**

<p>3. Equipment: Equipment items having a unit cost of \$1000 or more must be described in detail. Other equipment items with a unit cost of less than \$1000 can be described in narrative form at the bottom of this section.</p>				
Item and Description (Unit cost of \$1000 or more)	Quantity	Unit Purchase Price	Annual Unit Rental price	Amount Chargeable to Program
Briefly describe equipment items with a unit cost of less than \$1000.				
Total				\$ -
4. Travel				
Travel costs - briefly describe:				
Total				\$ -
5. Maintenance & Operations:				
Rental costs: briefly describe: _____				
Other Maintenance & Operations Costs: List Below (e.g., communications, printing, supplies, etc.) _____				
Total				\$ -

**MEDICARE IMPROVEMENTS FOR PATIENTS AND PROVIDERS PROGRAM (MIPPA)
Contractor SHIP and AAA Component
Contractor Supporting Budget Schedule**

6. Other Expenses			
Description	Total Cost	Amount Chargeable to Program	
Total:		\$	-
7. Contracts/Consultants: List each Contract/Consultant and amount.			
Contractor	Service(s) to be Provided	NYSOFA Use Contract Rec'd.	Amount Chargeable to Program
Total Number of Contracts: _____		Total	\$ -
8. Total Budget (Sum of Line 1-7)			\$ -

New York State Office for the Aging

Contractor: _____

Program Period: 9/30/15 - 9/29/16

**MEDICARE IMPROVEMENTS FOR PATIENTS AND PROVIDERS PROGRAM (MIPPA)
Contractor Budget Summary (ADRC)**

BUDGET CATEGORY	MIPPA (ADRC) BUDGET
1. Personnel	\$ -
2. Fringe Benefits	\$ -
3. Equipment	\$ -
4. Travel	\$ -
5. Maintenance & Operations	\$ -
6. Other Expenses	\$ -
7. Contracts/Consultants	\$ -
8. Total Budget (Lines 1 thru 7)	\$ -

**MEDICARE IMPROVEMENTS FOR PATIENTS AND PROVIDERS PROGRAM (MIPPA)
Contractor ADRC Component
Contractor Supporting Budget Schedule**

1. Personnel - Salaries are listed here.							
	Complete for Each Position (N)ame, (T)itle, (L)ocation	Annual Salary or Hourly Rate*	Hours worked on program per week	Total Hours worked per week	Chargeable to Program		Narrative Justification - For each position, provide a brief summary of duties related to MIPPA: *If charging a staff position to both SHIP/AAA and ADRC funding, provide explanation and clarity as to the individual MIPPA duties specific to SHIP/AAA and duties specific to ADRC. *Include specificity and relevance to MIPPA activities for all staff charged to this grant (i.e., administrative support, IT, managerial, etc.). *Include all in-kind staff that are contributing to MIPPA but are not charging salary.
					% of Time	Amount	
1	N						
	T						
	L						
2	N						
	T						
	L						
3	N						
	T						
	L						
4	N						
	T						
	L						
5	N						
	T						
	L						
6	N						
	T						
	L						
Total Program Personnel:						\$0.00	
*Note: If employee is paid a salary, then list the annual salary. If employee is not on salary, then list the hourly rate. When reporting the rate of pay on vouchering forms, the format (i.e., salary or hourly rate) must match this budget (although the actual salary or the hourly rate paid may be different than budgeted).							
2. Fringe Benefits- Fringe Benefits should be directly proportional to that portion of personnel costs that are program related. Provide a clear justification if the expenses are not proportionally allocated.							
Fringe Benefit Rate %:		0.00%	Total Fringe:			\$0.00	

**MEDICARE IMPROVEMENTS FOR PATIENTS AND PROVIDERS PROGRAM (MIPPA)
Contractor ADRC Component
Contractor Supporting Budget Schedule**

3. Equipment: Equipment items having a unit cost of \$1000 or more must be described in detail. Other equipment items with a unit cost of less than \$1000 can be described in narrative form at the bottom of this section.				
Item and Description (Unit cost of \$1000 or more)	Quantity	Unit Purchase Price	Annual Unit Rental price	Amount Chargeable to Program
Briefly describe equipment items with a unit cost of less than \$1000.				
Total				
4. Travel				
Travel costs - briefly describe:				
Total				\$ -
5. Maintenance & Operations:				
Rental costs: briefly describe: _____				
Other Maintenance & Operations Costs: List Below (e.g., communications, printing, supplies, etc.) _____				
Total				\$ -

**MEDICARE IMPROVEMENTS FOR PATIENTS AND PROVIDERS PROGRAM (MIPPA)
Contractor ADRC Component
Contractor Supporting Budget Schedule**

6. Other Expenses			
Description	Total Cost	Amount Chargeable to Program	
Total:		0.00	
7. Contracts/Consultants: List each Contract/Consultant and amount.			
Contractor	Service(s) to be Provided	NYSOFA Use Contract Rec'd.	Amount Chargeable to Program
Total Number of Contracts: _____		Total	\$ -
8. Total Budget (Sum of Line 1-7)			\$ -

**New York State Office for the Aging
Medicare Improvements for Patients and Providers Act**

Tentative Allocation Schedule - September 30, 2016 to September 29, 2017

COUNTY	ADRC	SHIP & AAA⁽¹⁾	Total Allocation
ALBANY	\$3,828	\$8,428	\$12,256
ALLEGANY	2,667	7,250	9,917
BROOME	3,656	7,502	11,158
CATTARAUGUS	2,968	7,250	10,218
CAYUGA	2,753	7,250	10,003
CHAUTAUQUA	3,527	7,250	10,777
CHEMUNG	2,796	7,250	10,046
CHENANGO	2,710	7,250	9,960
CLINTON	2,753	7,250	10,003
COLUMBIA	2,710	7,250	9,960
CORTLAND	2,667	7,250	9,917
DELAWARE	2,710	7,250	9,960
DUTCHESS	3,699	7,585	11,284
ERIE	10,838	21,092	31,930
ESSEX	2,667	7,250	9,917
FRANKLIN	3,140	7,250	10,390
FULTON	2,710	7,250	9,960
GENESEE	2,710	7,250	9,960
GREENE	2,710	7,250	9,960
HAMILTON	0 ⁽²⁾	3,870	3,870
HERKIMER	2,710	7,250	9,960
JEFFERSON	2,796	7,250	10,046
LEWIS	2,624	7,250	9,874
LIVINGSTON	2,710	7,250	9,960
MADISON	2,710	7,250	9,960
MONROE	10,021	14,503	24,524
MONTGOMERY	2,710	7,250	9,960
NASSAU	10,924	20,139	31,063
NIAGARA	3,699	7,637	11,336
ONEIDA	3,742	8,231	11,973
ONONDAGA	9,505	10,927	20,432
ONTARIO	2,753	7,250	10,003
ORANGE	3,914	8,023	11,937
ORLEANS	2,667	7,250	9,917
OSWEGO	0 ⁽³⁾	7,250	7,250
OTSEGO	2,710	7,250	9,960
PUTNAM	2,753	7,250	10,003
RENSSELAER	0 ⁽³⁾	7,250	7,250
ROCKLAND	0 ⁽³⁾	7,763	7,763
ST. LAWRENCE	3,484	7,250	10,734
SARATOGA	3,570	7,250	10,820
SCHENECTADY	3,527	7,250	10,777
SCHOHARIE	2,667	7,250	9,917
SCHUYLER	2,624	7,250	9,874
SENECA	0 ⁽³⁾	7,250	7,250
STEUBEN	2,796	7,250	10,046
SUFFOLK	11,125	18,389	29,514
SULLIVAN	2,753	7,250	10,003
TIOGA	2,667	7,250	9,917
TOMPKINS	2,710	7,250	9,960
ULSTER	3,613	7,250	10,863
WARREN	5,290	7,250	12,540
WASHINGTON	2,710	7,250	9,960
WAYNE	2,753	7,250	10,003
WESTCHESTER	10,365	14,420	24,785
WYOMING	2,667	7,250	9,917
YATES	2,624	7,250	9,874
NYC	0 ⁽³⁾	161,094	161,094
SENECA NATION	0 ⁽³⁾	3,624	3,624
ST. REGIS	1,505	3,624	5,129
TOTAL	\$202,617	\$638,601	\$841,218

Footnotes:

(1) As in the previous MIPPA grant, all counties have been designated for rural outreach except: NYC; Westchester, Nassau and Suffolk Counties. One third of the funding is designated for Rural outreach counties only.

(2) The ADRC responsible for Hamilton and Warren Counties is a multi-county model and is administered through Warren County. Hamilton County's allocation is combined with Warren County and the sum is shown as awarded to Warren County.

(3) No functioning ADRC in this County prior to September 30, 2014, therefore, there is no ADRC award.